FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

| | 11799 | 126 | | | | | | | | |
|----|--------------------------|--------------|--|--|--|--|--|--|--|--|
| | | PROVAL | | | | | | | | |
| | OMB Number | 3235-0076 | | | | | | | | |
| | Expires: | May 31, 2005 | | | | | | | | |
| | Estimated average burden | | | | | | | | | |
| | hours per response 1.00 | | | | | | | | | |
| | SEC USE ONLY | | | | | | | | | |
| | Prefix | Serial | | | | | | | | |
| | | | | | | | | | | |
| ON | DATE RI | ECEIVED | | | | | | | | |

| Name of Offering ((_)) check if this is an amendment and name has changed, and indicate change.) | |
|--|-----------------------|
| Rule 506-1 at \$1.00 per share | |
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) | ULOE |
| Type of Filing: New Filing | |
| A. BASIC IDENTIFICATION DATA | |
| Enter the information requested about the issuer | |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) | 1 1 2 2 |
| Alaska Oil & Gas Inc. | |
| Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Incl | uding Area Code) |
| #1305-1090 W. Georgia Street, Vancouver, B.C. V6E 3V& (604)/685-9316 | and the second second |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Incl | uding Area Code) |
| (If different from Executive Offices) | |
| Brief Description of Business RECEIVED RECEIVED | |
| | DDAACCC |
| Oil and gas exploration. | > PROCESSE |
| On and gas exploration. | There is a moon |
| | '/AUG U 8 2002 |
| Type of Business Organization | TUOMEON |
| corporation limited partnership, already formed other (please specify): | THOMSON |
| business trust limited partnership, to be formed | FINANCIAL |
| Month Year | |
| Actual or Estimated Date of Incorporation or Organization: 0 7 Actual | Estimated |
| Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: | |
| CN for Canada: FN for other foreign jurisdiction) | |

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6/99)

| 2. Enter the information requ | ested for the follo | | MITTEATION DATA | | |
|-------------------------------|--|------------------------------|---|---|---------------------------------|
| • Each promoter of the i | ssuer, if the issuer | has been organized within | the past five years: | | |
| • | , | _ | et the vote or disposition of, 10 | % or more of a class of e | ouity securities of the issuer |
| | | | orate general and managing pa | | |
| | | | orate general and managing pa | futers of partnership issu | crs, and |
| Each general and man | | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, i | f individual) | | Pres., Sec. & Treas. | | |
| DeMare, Nick | | | | | |
| Business or Residence Addre | ss (Number and S | treet, City, State, Zip Code |) | | |
| #1305 - 1090 W. Georgia Str | | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, i | f individual) | - | | | |
| Business or Residence Addre | ss (Number and S | treet, City, State, Zip Code |) | | |
| | <u> </u> | E P. 6:10 | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, i | findividual) | <u> </u> | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| Business or Residence Addre | ss (Number and S | treet, City, State, Zip Code |) | | A |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or |
| ` , , | | | | | Managing Partner |
| Full Name (Last name first, i | f individual) | | | | |
| Business or Residence Addre | ss (Number and S | treet, City, State, Zip Code |) | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, i | f individual) | | 37 to 111 m | *************************************** | |
| Business or Residence Addre | ss (Number and S | treet, City, State, Zip Code |) | | , |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or |
| | e n 11. de son anna 2000, se l'hi è Princ | | | | Managing Partner |
| Full Name (Last name first, i | f individual) | | | | |
| Business or Residence Addre | ss (Number and S | treet, City, State, Zip Code | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, i | f individual) | | | | |
| Business or Residence Addre | ss (Number and S | treet, City, State, Zip Code |) | | |

| | 7528 208 | | | | | | | T I | B. INF | ORM | ATIO | N ABO | OUT OFFE | RIN | G 🕌 | | 1737 | | TO E.L. | S. 7918 | | | |
|---------------------|--|--|-------------------------------------|--------------------------------|-----------------------------------|--|------------------------|-----------------------------|------------------|---------------------|-------------------|-------------------|---|-------------------|---------------------|-------------------|----------------------|----------------|--------------------|-------------|--------------|------|--------------|
| <u></u> | Has th | | | | | | | | | | | | tors in this | | | | | | | | 38.90 | Yes | |
| | | | | | | Answei | · also | in App | endix | , Colur | mn 2, | if filing | under ULO |)E | | | | | | | | | |
| 2. | What | is the n | ninim | um inv | estme | ent that | will | oe acce | epted f | rom ar | ıy indi | vidual' | ? | | | | | | | | \$ | 1.00 |) |
| | (1) This notice on Form D relates to the share exchange between the issuer and E-Trend Networks, Inc., a Nevada corporation. | | | | | | | | | - | Yes | s No | | | | | | | | | | | |
| 3. | 3. Does the offering permit joint ownership of a single unit? | | | | | | | | | | | \boxtimes | | | | | | | | | | | |
| 4. | simila an ass broken the in | r remui sociated r or dea formati | neration l persoler. I on for | on for a on or a f more that b | solicit agent than roker | tation o of a br five (5) or deal | f puro oker pers | chasers or dea ons to | in co ler reg | nnectio gistereo | on with I with | h sales the SI | id or given of securitie EC and/or versions of such | s in th vith a | ne offer state o | ing. I er stat | f a pers es, list | on to the n | be liste ame of | d is | | | |
| Full Nar Not App | ` | | | | | • | a naid | l in co | nnacti | an with | thic t | rancact | ion | | | • | | | | | | | |
| | | | | | | | - • | | | | | laiisaci | .1011. | | | | | | | | | | |
| Busines | s or Ke | sidence | e Add | ress (N | umbe | er and S | тгеет, | сну, | State, | Zip Co | ae) | | | | | | | | | | | | |
| Name o | f Assoc | ciated E | Broker | or De | aler | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| States in (Check | | | | | | | | ids to S | Solicit | Purcha | asers | | | | | | | | | | | A 11 | States |
| [AL] | All Si | AK] | | A murv | | [AR] | | [CA] | П | [CO] | П | [CT] | [DE] | | [DC] | | [FL] | | [GA] | | [HI] | | [ID] |
| | | [IN] | | [IA] | | [KS] | | [KY] | | [LA] | | [ME] | [MD] | | [MA] | | [MI] | | [MN] | | [MS] | П | [MO] |
| [MT] | | [NE] | | [NV] | | [NH] | | [NJ] | | [NM] | | [NY] | | | [ND] | | [OH] | | [OK] | | [OR] | | [PA] |
| [RJ] | | [SC] | | [SD] | | [TN] | | [TX] | | [UT] | | [VT] | [VA] | | [WA] | | [WV] | | [WI] | | [WY] | | [PR] |
| Full Na | me (La | st name | e first, | , if indi | vidua | l) | _ | | | | | | | | | | | | | | | | |
| | ` | | | | | , | | | | | | | | | | | | | | | | | |
| Busines | s or Re | sidence | e Add | ress (N | umbe | er and S | treet, | City, | State, | Zip Co | de) | | | | | | | | | | | | |
| Name o | f Acco | niated E | Proke | r or De | aler | | | | | | | | | | | | | | | | | | |
| Name o | 1 /13300 | ciaicu i | JIOKCI | of DC | aici | | | | | | | | | | | | | | | | | | |
| States in | n Whic | h Perso | n Lis | ted Has | Soli | cited or | Inter | ids to S | Solicit | Purcha | asers | | | | | | | | | | | | |
| (Check | | | _ | | _ | · · | _ | | _ | | | | | | | | | | | | | _ | States |
| [AL] | | [AK] | | | | [AR] | | | | [CO] | | [CT] | [DE] | | | | [FL] | | [GA] | | [HI] | | [ID] |
| | | [IN] | | [IA] | | [KS] | | [KY] | | [LA] | | [ME] | | | - | | [MI] | | [MN] | | [MS] | | [MO] |
| | | [NE] | | [NV] | | [NH] | | [NJ] | | [NM] | | [NY] | [NC] | | | | [OH] | | [OK] | | [OR] | | [PA] |
| [RI] | LJ | [SC] | | [SD] | | [TN] | | [TX] | | [UT] | | [VT] | [VA] | | [WA] | | [WV] | | [WI] | L | [WY] | | [PR] |
| Full Na | me (La | st name | e first | , if indi | vidua | ıl) | | | | | | | | | | | | | | | | | |
| Busines | c or De | sidenc | <u> </u> | recc (N | lumbe | er and S | treet | City | State | Zin Co | de) | | - | | | | | | | | | | |
| Dusines | 3 01 AC | Sidelle | c Add | 1033 (11 | umoc | or and c | , in CCI, | City, | Siare, | Zip Co | ,uc) | | | | | | | | | | | | |
| Name o | f Asso | ciated I | Broke | r or De | aler | | | | | , | | | | | | | | | · | | | | |
| States in | | | | | | | | | | | | | | 3-7-1 | | | | | | | | | |
| , | | | | | idual/ | | _ | | _ | | _ | | | | | | | <u>.</u> | | | | _ | States |
| | _ | [AK] | | [AZ] | | [AR] | | [CA] | | [CO] | | [CT] | [DE] | | [DC] | | (FL) |] [| [GA] |] [| [HI] | | [ID] |
| | | [IN] |] | [IA] [NV] | | [KS] | | [KY] | | [LA] [NM] | | [ME] | ☐ [MD] | | | | [MI] [OH] | | [MN] [OK] | | [MS] | | [MO] |
| ☐ [MT] | | [NE] | | [SD] | | [NH] [TN] | | [IVJ] [TX] | | [UT] | | [NY] [VT] | [NC] | | [WA] | | [WV] | | [WI] | | [OR] [WY] | | [PA] [PR] |
| 1 1 [177] | 1 1 | [30] | | (30) | | [* * *] | 1 1 | [* / *] | 1 1 | [0.1] | 1 ! | 1 * * 3 | 1 1 1 1 1 1 1 1 | - 1 1 | [,,,,,, | | 1 1 | | [""] | | [** *] | | 1, 1, |

| Type of Security | Aggregate Offering Price | Amount Already Sold |
|---|--------------------------|----------------------------|
| Debt | \$ | \$ |
| Equity | \$ 1,500,000 | \$ 200,000 |
| Common ☐ Preferred | | <u> </u> |
| Convertible Securities (including warrants) | \$ | \$ |
| Partnership Interests | | \$ |
| Other (Specify) | \$ | \$ |
| Total | | \$ 200,000 |
| | | |
| Answer also in Appendix, Column 3, if filing under ULOE. | | |
| Enter the number of accredited and non-accredited investors who have purchased securities in this offer and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number persons who have purchased securities and the aggregate dollar amount of their purchases on the total lenter "0" if answer is "none" or "zero." | er of | Aggregate |
| | Number Investors | Dollar Amount of Purchases |
| Accredited Investors | 4 | \$ 200,000 |
| Non-Accredited Investors | | \$ |
| Total (for filings under Rule 504 only) | 4 | \$ 200,000 |
| Answer also in Appendix, Column 4, if filing under ULOE. | | |
| If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities s by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale securities in this offering. Classify securities by type listed in Part C - Question 1. | e of | 5. 11 |
| Type of Offering | Type of Security | Dollar Amount Sold |
| Rule 505 | | \$ |
| Regulation A | | \$ |
| Rule 504 | | \$ |
| Total | | - \$ \$ |
| a. Furnish a statement of all expenses in connection with the issuance and distribution of the securit this offering. Exclude amounts relating solely to organization expenses of the issuer. The information be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | ties in | - |
| Transfer Agent's Fees | |] \$ |
| Printing and Engraving Costs | | \$ |
| Legal Fees | ····· | \$ 2,000 |
| Accounting Fees | | \$ |
| Engineering Fees | |] \$ |
| Sales Commissions (specify finders' fees separately) | _ |] \$ |
| Other Expenses (identify) Phone, fax, courier, mail, copying | | \$ 1,000 |
| Total | | |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| C. OFFERD | NG PRICE NUMBER OF INVESTORS EXPENSES A | ND USE OF PROCEEDS | |
|--|--|---|-----------------------|
| Question I and total expenses furni the "adjusted gross proceeds to the i | he aggregate offering price given in response to Part C - shed in response to Part C - Question 4.a. This difference ssuer." | | \$ <u>1,497,000</u> |
| for each of the purposes shown. If and check the box to the left of the | justed gross proceeds to the issuer used or proposed to be use the amount for any purpose is not known, furnish an estima e estimate. The total of the payments listed must equal the set forth in response to Part C - Question 4.b above. | te | |
| | | Payment to Officers, Directors, & Affiliates | Payments to Others |
| Salaries and fees | | \$ | □ \$ |
| Purchase of real estate | | \$ | S |
| Purchase, rental or leasing and insta | llation of machinery and equipment | □ s | □ \$ |
| Construction or leasing of plant buil | dings and facilities | s | □ \$ |
| Acquisition of other businesses (incl may be used in exchange for the ass | □ \$ | □ \$ | |
| Repayment of indebtedness | | □ \$ | S |
| Working capital | X \$ 20,000 | | |
| Other (specify): Acquisition of ir | | X \$1,000,000 | |
| | | | |
| | | □ s | S |
| Column Totals | | X \$ 20,000 | |
| Total Payments Listed (column total | s added) | X \$ 1. | 497,000 |
| The second secon | D. FEDERAL SIGNATURE | | |
| constitutes an undertaking by the issuer to | e signed by the undersigned duly authorized person. If this n furnish to the U.S. Securities and Exchange Commission, up or pursuant to paragraph (b)(2) of Rule 502. | | |
| Issuer (Print or Type) | Signature , | Date | |
| Alaska Oil & Gas Inc. | Ned DeMare | July 26, 2002 | 2 |
| Name of Signer (Print or Type) | Title of Signer (Print or Type) | | |
| Nick DeMare | President | | |

| TEN | | | | | | | | | | |
|-----|---|---|--------------------|------|--|--|--|--|--|--|
| 12. | | E-STATE SIGNATURE | Land Landson | | | | | | | |
| à | | | Yes | No | | | | | | |
| 1. | Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? | | | | | | | | | |
| | See Appendi | x, Column 5, for state response. | | | | | | | | |
| 2. | 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law. | | | | | | | | | |
| 3. | . The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. | | | | | | | | | |
| 4. | | ar with the conditions that must be satisfied to be entitled to the Unifor tice is filed and understands that the issuer claiming the availability of been satisfied. | | | | | | | | |
| | e issuer has read this notification and knows the contents to horized person. | be true and has duly caused this notice to be signed on its behalf by the | e undersigned duly | | | | | | | |
| | uer (Print or Type) iska Oil & Gas Inc. | Signature Neck DoMars | Date July 26, | 2002 | | | | | | |
| Nai | me of Signer (Print or Type) | Title of Signer (Print or Type) | | | | | | | | |

President

Instruction:

Nick DeMare

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.